HAWAII STATE ETHICS COMMISSION

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Telephone: (808) 587-0460 FAX: (808) 587-0470
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	GIFTS DISCLOSURE STATE	MENT			
(This rep	ort covers the period from June 1 of the preceding calendar year throu	gh June 1 of this ye	ar and is due on June 30	7)	
NAME: David Lane		STATE POSITION: Chief Compliance and Privacy Q			
STATE AGENCY: Hawaii Health Systems Corporation		STATE TEL. NO.: 808-240-2834			
STATE MAILING ADDRE	SS: P.O. Box 520 Kalaheo, HI 96741	-			
1 DONOR	2 DESCRIPTION OF GIFT	DATE REC'D	GIFT VALUE	5 AGG. VALUE	
AAPC	Flight, Lodging, and Hotel for AAPC Conference	4/2012	\$1540		
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DESCRIPTION OF GIFT		3 DATE REC'D	4 GIFT VALUE	5 AGG. VALUE
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	712	*12 APR -9 STATE OF STATE ETHICS	STATE OF HAWAII STATE ETHICS COMMISSION	STATE OF HAWAII STATE ETHICS COMMISSION

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

SIGNATURE

DATE